



**PLEASE PRINT LEGIBLY**

Name \_\_\_\_\_

Birthdate \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Residence Telephone # \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

**Emergency Contact Information**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell# \_\_\_\_\_ Resident # \_\_\_\_\_

Other \_\_\_\_\_

I certify that I, have read, understand and abide by Northbrook Sports Club's Waiver of Liability Agreement, Safety and Administrative Rules. By signing this application I agree to the stated terms and conditions for myself and immediate family.

Applicants' Signature

Date

Attach a copy of your F.O.I.D. to this application and indicate the number and expiration date below.

F.O.I.D. # \_\_\_\_\_ Expires \_\_\_\_\_

List All Family Members (with age) who may shoot at the Club.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently, or have you been a Member of NSC or another Club? If yes, please list.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Shooting Experience \_\_\_\_\_  
\_\_\_\_\_

How did you find out about the Northbrook Sports Club?

\_\_\_\_\_  
\_\_\_\_\_

Please check those that interest you.

Skeet  Trap  Sporting Clays  FITASC  5-Stand

Occupation/Title \_\_\_\_\_

Employer \_\_\_\_\_

Business Tel # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_